

VACCINE ADVERSE EVENT REPORTING SYSTEM (VAERS)
Patient Identity Kept Confidential

***Supplemental Information for
Smallpox Vaccine in Pregnancy Registry***

Based on Form VAERS-1.

Return to code25@nhrc.navy.mil, or call DSN 553-9255, or 619-553-9255. POC:
Dr. Margaret Ryan

Other ways to report Vaccine Adverse Events: www.vaers.org, 800-822-7967, PO Box 1100, Rockville, MD 20849-1100

Clinical consultation on vaccination issues may be referred to the Vaccine Healthcare Centers, www.vhcinfo.org , 202-782-0411

These data will be used to increase understanding of adverse events following vaccination and will become part of Centers for Disease Control and Prevention Privacy Act System 09-20-0136, "Epidemiologic Studies and Surveillance of Disease Problems." Information identifying the person who received the vaccine or that person's legal representative will not be made available to the public, but may be available to the vaccinee or legal representative.

Patient Name (rank/service):
Patient SSN:
Patient date of birth:
Patient address [military unit and duty location]:
Email and/or phone:

Form completed by:
Relation to patient:
Address:
Email and/or phone:
Date form completed:

Date smallpox vaccination given:
Facility name/location:

Date smallpox vaccine "take" assessed:
Was "take" evident? Yes No

Was pre-vaccination screening form completed? Yes No
If Yes, please provide copy if available.

Date pregnancy diagnosed:

Date of last normal menstrual period:

If ultrasound used for gestational age, provide results:

Method of birth control used at time of conception, if any:

Number of previous pregnancies:

List outcomes (with dates) of any previous pregnancies.

Was this the first smallpox vaccination for this patient? Yes No

If No, please provide approximate date(s) of any previous smallpox vaccinations.

Were any other vaccines administered during this pregnancy? Yes No

If Yes, please list other vaccines and dates administered:

Medical facility where patient will be followed (name/address/phone):